

See "Instructions for Filling out the Work Permit" contained in the Work Planning and Control for Experiments and Operations Subject Area.

**1. Work request WCC fills out this section.**

☐ Standing Work Permit

Requester: Don Lynch	Date: 7/10/2012	Ext.: 2253	Dept/Div/Group: PO/PHENIX
Other Contact person (if different from requester): Carter Biggs			Ext.: 7515
Work Control Coordinator: Don Lynch		Start Date: 7/16/2012	Est. End Date: 10/15/2012
Brief Description of Work: Enter MMN, Erect work platforms, repair/upgrade MuTr & MuTrgr Sta 2 & 3 Electronics			
Building: 1008	Room: IR	Equipment: MuTr, MuTrgr, MMN	Service Provider MuTr/MuTrgr Experts, PHENIX Techs

**2. WCC, Requester/Designee, Service Provider, and ESS&H (as necessary) fill out this section or attach analysis**

<b>ESS&amp;H ANALYSIS</b>			
<b>Radiation Concerns</b>	<input checked="" type="checkbox"/> None	<input type="checkbox"/> Activation	<input type="checkbox"/> Airborne
	<input type="checkbox"/> Contamination	<input type="checkbox"/> Radiation	<input type="checkbox"/> NORM
	<input type="checkbox"/> Other		
<input type="checkbox"/> Special nuclear materials involved, notify Isotope Special Materials Group			
<input type="checkbox"/> Fissionable/Radiological materials involved, notify Laboratory Nuclear Safety Officer			
<b>Radiation Generating Devices:</b>	<input type="checkbox"/> Radiography	<input type="checkbox"/> Moisture Density Gauges	<input type="checkbox"/> Soil Density Gauges
	<input type="checkbox"/> X-ray Equipment		
<b>Safety and Security Concerns</b>	<input type="checkbox"/> None	<input type="checkbox"/> Explosives	<input type="checkbox"/> Transport of Haz/Rad Material
	<input type="checkbox"/> Pressurized Systems		
<input type="checkbox"/> Adding/Removing Walls or Roofs	<input type="checkbox"/> Critical Lift	<input type="checkbox"/> Fumes/Mist/Dust*	<input type="checkbox"/> Magnetic Fields*
<input type="checkbox"/> Railroad Work	<input type="checkbox"/> Asbestos*	<input type="checkbox"/> Cryogenic	<input type="checkbox"/> Heat/Cold Stress
<input type="checkbox"/> Nanomaterials/particles*	<input type="checkbox"/> Beryllium*	<input type="checkbox"/> Electrical	<input type="checkbox"/> Hydraulic
<input type="checkbox"/> Noise*	<input type="checkbox"/> Biohazard*	<input checked="" type="checkbox"/> Elevated Work	<input type="checkbox"/> Lasers*
<input type="checkbox"/> Non-ionizing Radiation*	<input type="checkbox"/> Chemicals/Corrosives*	<input type="checkbox"/> Excavation	<input type="checkbox"/> Lead*
<input type="checkbox"/> Oxygen Deficiency*	<input checked="" type="checkbox"/> Confined Space*	<input type="checkbox"/> Ergonomics*	<input type="checkbox"/> Material Handling
<input type="checkbox"/> Penetrating Fire Walls	<input type="checkbox"/> Vacuum	<input type="checkbox"/> Other	
* Safety Health Rep. Review Required <input type="checkbox"/> Haz, Rad, Bio Material Exceed DOE 151.1-C Levels - Contact OEM			
<b>Environmental Concerns</b>			
<input checked="" type="checkbox"/> None	<input type="checkbox"/> Work impacts Environmental Permit No.		
<input type="checkbox"/> Atmospheric Discharges (rad/non-rad)	<input type="checkbox"/> Land Use Institutional Controls	<input type="checkbox"/> Soil Activation/contamination	<input type="checkbox"/> Waste-Mixed
<input type="checkbox"/> Chemical or Rad Material Storage or Use	<input type="checkbox"/> Liquid Discharges	<input type="checkbox"/> Waste-Clean	<input type="checkbox"/> Waste-Radioactive
<input type="checkbox"/> Cesspools (UIC)	<input type="checkbox"/> Oil/PCB Management	<input type="checkbox"/> Waste-Hazardous	<input type="checkbox"/> Waste-Regulated Medical
<input type="checkbox"/> High water/power consumption	<input type="checkbox"/> Spill potential	<input type="checkbox"/> Waste-Industrial	<input type="checkbox"/> Underground Duct/Piping
Waste disposition by: <input type="checkbox"/> Other			
<b>Pollution Prevention (P2)/Waste Minimization Opportunity:</b>			
<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
<b>FACILITY CONCERNS</b>			
<input checked="" type="checkbox"/> None	<input type="checkbox"/> Intermittent Energy Release		
<input type="checkbox"/> Access/Egress Limitations	<input type="checkbox"/> Electrical Noise	<input type="checkbox"/> Potential to Cause a False Alarm	<input type="checkbox"/> Vibrations
<input type="checkbox"/> Impacts Facility Use Agreement	<input type="checkbox"/> Temperature Change	<input type="checkbox"/> Other	
<input type="checkbox"/> Configuration Management	<input type="checkbox"/> Maintenance Work on Ventilation Systems	<input type="checkbox"/> Utility Interruptions	
<b>WORK CONTROLS</b>			
<b>Work Practices</b>			
<input type="checkbox"/> None	<input type="checkbox"/> Exhaust Ventilation	<input checked="" type="checkbox"/> Lockout/Tagout	<input type="checkbox"/> Spill Containment
<input type="checkbox"/> Security (see Instruction Sheet)	<input checked="" type="checkbox"/> Back-up Person/Watch	<input type="checkbox"/> HP Coverage	<input type="checkbox"/> Posting/Warning Signs
<input type="checkbox"/> Time Limitation	<input type="checkbox"/> Other	<input type="checkbox"/> Barricades	<input type="checkbox"/> IH Survey
<input checked="" type="checkbox"/> Scaffolding-requires inspection	<input type="checkbox"/> Warning Alarm (i.e. "high level")	<input type="checkbox"/> Electrical Inspection Required	
<b>Personal Protective Equipment</b>			
<input type="checkbox"/> None	<input type="checkbox"/> Ear Plugs	<input checked="" type="checkbox"/> Gloves as appropriate	<input type="checkbox"/> Lab Coat
<input checked="" type="checkbox"/> Safety Glasses as appropriate	<input type="checkbox"/> Coveralls	<input type="checkbox"/> Ear Muffs	<input type="checkbox"/> Goggles
<input type="checkbox"/> Respirator*	<input type="checkbox"/> Disposable Clothing	<input type="checkbox"/> Face Shield	<input type="checkbox"/> Hard Hat
<input type="checkbox"/> Shoe Covers	<input checked="" type="checkbox"/> Safety Shoes	<input type="checkbox"/> High visibility cloths/vest	<input type="checkbox"/> Other
<b>Permits Required (Permits must be valid when job is scheduled.)</b>			
<input type="checkbox"/> None	<input type="checkbox"/> Cutting/Welding	<input type="checkbox"/> Impair Fire Protection Systems	
<input type="checkbox"/> Concrete/Masonry Penetration	<input type="checkbox"/> Digging/Core Drilling	<input type="checkbox"/> Rad Work Permit-RWP No	
<input type="checkbox"/> Confined Space Entry	<input type="checkbox"/> Electrical Working Hot	<input checked="" type="checkbox"/> Other Confined Space 2A certification	
<b>Dosimetry/Monitoring</b>			
<input type="checkbox"/> None	<input type="checkbox"/> Heat Stress Monitor	<input type="checkbox"/> Real Time Monitor	<input type="checkbox"/> TLD
<input type="checkbox"/> Air Effluent	<input type="checkbox"/> Noise Survey/Dosimeter	<input type="checkbox"/> Self-reading Pencil Dosimeter	<input type="checkbox"/> Waste Characterization
<input type="checkbox"/> Ground Water	<input type="checkbox"/> O <sub>2</sub> /Combustible Gas	<input type="checkbox"/> Self-reading Digital Dosimeter	<input checked="" type="checkbox"/> Other Check O <sub>2</sub> level prior to entry
<input type="checkbox"/> Liquid Effluent	<input type="checkbox"/> Passive Vapor Monitor	<input type="checkbox"/> Sorbent Tube/Filter Pump	
<b>Training Requirements (List specific training requirements)</b>			
Confined Space, CA-Colider User, PHENIX Awareness, scaffold training, ladder training, working at heights			
<b>Based on analysis above, the Review Team determines the risk, complexity, and coordination ratings below:</b>		<b>If using the permit when all hazard ratings are low, only the following need to sign: ( Although allowed, there is no need to use back of form)</b>	
<b>ESS&amp;H Risk Level:</b>	<input checked="" type="checkbox"/> Low <input type="checkbox"/> Moderate <input type="checkbox"/> High	<b>WCC:</b>	<b>Date:</b>
<b>Complexity Level:</b>	<input checked="" type="checkbox"/> Low <input type="checkbox"/> Moderate <input type="checkbox"/> High	<b>Service Provider:</b>	<b>Date:</b>
<b>Work Coordination:</b>	<input type="checkbox"/> Low <input checked="" type="checkbox"/> Moderate <input type="checkbox"/> High	<b>Authorization to start</b>	<b>Date:</b>
(Department/Division, or their equivalent, Sup/WCC/Designee)			

**3. Both work requester and service provider contribute to work plan (use attachments for detailed plans)**

**Work Plan** (procedures, timing, equipment, scheduling, coordination, notifications, and personnel availability need to be addressed in adequate detail): See attached work plan and procedure

Special Working Conditions Required (e.g., Industrial Hygiene hold points or other monitoring)

None

Notifications to operations and Operational Limits Requirements: None

Post Work Testing, Notification or Documentation Required:

Job Safety Analysis Required: ☐ Yes ☒ No

Review Done: ☒ in series ☐ team

**Reviewed by:** \* Primary Reviewer signature means that the Review Team members were appropriate for the work that was planned, the Team visited the job site, hazards and risks that could impact ESS&H have been considered and controls established according to BNL requirements. In addition, this signature indicates that applicable JRAs, FRAs, as well as other planning documents have been reviewed and training requirements have been identified and recorded on this permit.

Title	Name (print)	Signature	Life #	Date
ES&H Professional				
F&O Facility Project Manager				
Service Provider				
Work Control Coordinator	Don Lynch		20146	
Safety Health Representative				
Research Space Manager				
Other				
Other (PHENIX Escort)				
Required Walkdown Completed				
*Primary Reviewer				

**4. Job site personnel (Supervisor and workers) fill out this section.**

Note: Signature indicates personnel performing work have read and understand the hazards and permit requirements (including any attachments) and all training required for this permit is current/complete. Job Supervisor/Contractor Supervisor signatures also includes verification that worker training required for this permit is current/complete.

Job Supervisor:		Contractor Supervisor:	
Workers:	Life#:	Workers :	Life#:

Workers are encouraged to provide feedback on ESS&H concerns or on ideas for improved job work flow. Use feedback form or space below.

**5. Department/Division, or their equivalent, Line Manager or Designee**

Conditions are appropriate to start work: (Permit has been reviewed, work controls are in place and site is ready for job.)

Name:	Signature:	Life#:	Date:
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**6. Worker provides feedback.**

**Worker Feedback (use attached sheets as necessary)**

a) WCM/WCC: Are there any changes as a result of worker feedback? ☐ Yes ☐ No

Note: See Work Planning and Control for Experiments and Operations Subject Area section 2.6.

**7. Post Job Review/Closeout: Work Control Coordinator (authorizing dept.) checks quality of completed permit and ensures the work site is left in an acceptable condition. (WCC can delegate clean up of job site to work supervisor.)** The WCC ensures that the change process to update drawings, placards, postings, procedures, etc., is initiated, if necessary.

Name:	Signature:	Life#:	Date:
Comments:			

**MMN Entry During Shutdown for MuTr/MuTrigger North Troubleshooting****INTRODUCTION**

Muon Tracker Detector (MuTr) and MuTrigger experts need to access the interior of the North Muon Magnet to install/troubleshoot/test noise reduction mechanically attached capacitors to MuTr detector subsystem electronics during the 2012 maintenance summer shutdown period after the end of run 11 of the PHENIX experiment and to perform additional troubleshooting and repairs on MuTr and MuTrigger front end electronics (FEE's). During this period purge gas conditions (inert gases) for subsystems in the MMN will be maintained.

**MMN MuTr TTS&R (Troubleshoot, Test and Repair)**

The following operations will take place the PHENIX 2012 maintenance shutdown periods.

1. For the duration shutdown during which the MMN will be entered as described herein, all PHENIX magnets will be ramped down and locked out.
2. Prior to the first maintenance period for which entry into the MMN is required, C-A safety shall be contacted to sample the internal atmosphere of the MMN. When C-A safety arrives to take the, the sliding access panel shall be opened to permit sampling and an O<sub>2</sub> content check of the MMN internal atmosphere shall be sampled and recorded on a copy of the attached sheet. Each monitoring check shall have its own record sheet.
3. The C-A confined space safety expert shall determine from the tests whether it is safe to enter the MMN for the purposes stated herein. ***In no event shall anyone enter the MMN prior to approval of the C-A confined space monitoring expert.***
4. **During the entire maintenance period in which personnel may be inside the MMN, a 100 cfm blower shall direct external air into the MMN cavity.**
5. After clearance to enter has been approved, properly trained PHENIX technicians and BNL carpenter(s) shall sign the entry log sheet (attached) and may then enter and construct elevated work platforms as described in PHENIX document DRL-ECD-2012-002 rev D, for the purpose of accessing MuTr and MuTrigger FEE's and detector electronics at elevated areas within the North Muon Magnet (MNN). At any time when any personnel are inside of the MMN an additional watch person shall be stationed outside of the MMN and adjacent to the hatch to monitor the well being of those engaged in work inside. The watch person shall have no other responsibilities during his watch and may not leave his post unless relieved by an equally qualified and dedicated watch person. All work platforms shall be reviewed, inspected and approved by appropriately qualified PHENIX engineering prior to permitting work to be performed on such platforms. At various times during the troubleshooting and repairs, adjustments and changes to the work platforms shall be made to better access different areas in the MMN. After each such adjustment, an appropriately qualified PHENIX engineer shall review, inspect and approve such platform prior to releasing it for use. All inspections shall be documented on the attached MMN work platform inspection sheet.

***Note: at all times the number of persons and the combined weight of persons and equipment shall be below the maximum allowable (2 persons and less than 600 lbs on each platform, 3 persons and less than 900 lbs on all platforms in the MMN). This is in accordance with the design calculations of DRL-ECD-2012-002 rev D.***

6. After clearance work platforms have been erected, properly trained MuTr subsystem and MuTrigger FEE experts and/or properly trained PHENIX technicians shall sign the entry log sheet (attached) and may then enter and perform troubleshooting and operational checks. At any time when any personnel are inside of the MMN an additional watch person shall be stationed outside of the MMN and adjacent to the hatch to monitor the well being of those engaged in work inside. The watch person shall have no other responsibilities during his watch and may not leave his post unless relieved by an equally qualified and dedicated watch person. All those inside the MMN and the watch person shall have current BNL confined safety training and shall comply with all requirements of the BNL Confined Space SBMS standards. As work progresses ***This work permit, the MMN entry log, platform inspection sheet(s) and the Confined Space Entry Certification Form shall be posted near the access hatch.***

7. During testing, HV to the MuTr detector panels may turned on and off to trouble shoot faults and test quality of the repair/test connections. Current/voltage limits on MuTr components are within allowable working limits per the PHENIX Awareness Procedure and/or properly shielded from personnel contact and do not require any additional permits.

7. After all work has been completed and no additional access to the interior MMN is required for the current maintenance shutdown period all equipment brought into the MMN shall be removed, work platforms dismantled, the MMN access panel closed, and the MMN lockout removed.

8. After all tasks covered by this work permit have been completed, all equipment brought into the MMN has been removed, the MMN access panel closed and the MMN lockout removed, this work permit shall be closed and all relevant observations and comments concerning the work performed under this work permit shall be recorded. Should additional subsequent work in the MMN be required, a new work permit shall be generated.

# MuTr Station 2 & 3

## Re-Capacitation and Termination

Re-capacitation of MuTr stations 2 and 3 (inside MMS and MMN magnets) will be done using clamping and installation technique developed by MuTr experts during run 12 as was performed during 2011 shutdown. Method requires no soldering or gluing, requiring only mechanical clamps.

During 2011 summer shutdown only areas requiring no interior scaffolding or elevated work platforms were addressed. Elevated work in MMN and MMS will be performed during 2012 shutdown.



# Station-3 Clamp Installation



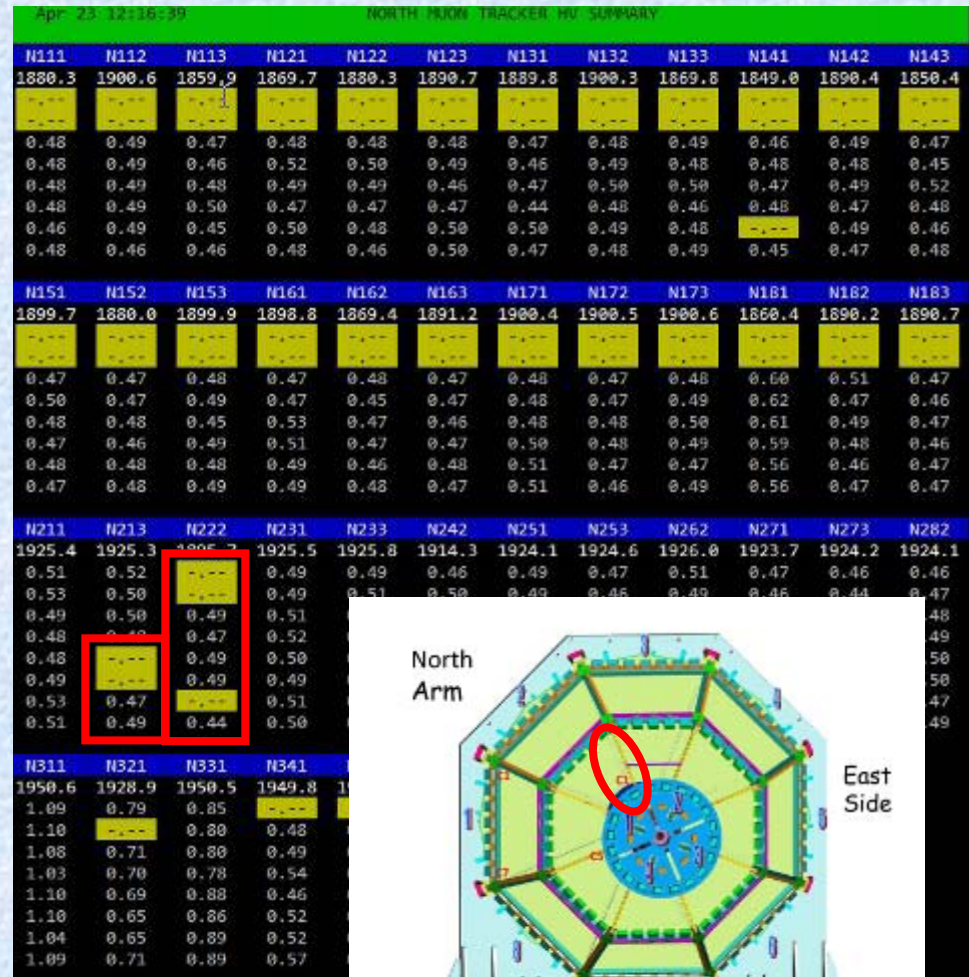
- Anode card Inspection with mirror : < 5min./clamp.
- Anode clean up if necessary : < 15 min./clamp
- Clamp mount : ~ 5min./clamp
- Voltage readout : 5min./clamp
- HV test : 10min.
- Total : 25 ~ 40 min./clamp

# North Sta-2 Oct-2 HV Repairs

5/12 HV channels in North Sta-2 Oct-2 bad

- located on interior of magnet at top
- pull dry air manifold
- investigate why these channels bad
- potentially remove and replace capacitors
- or isolate broken wires and disconnect from HV to recover other wires in same HV channel
- replace dry air manifold

Also check HV clamp-terminators in North Sta-3 (3 HV channels are disabled); and in South



View from IR  
Slide # 3

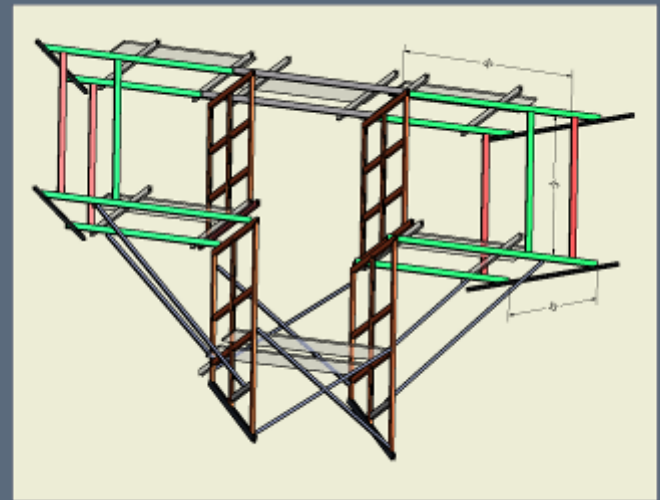
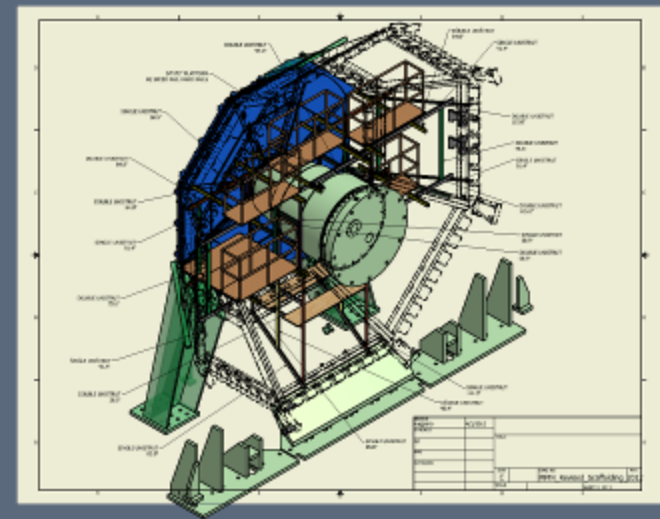


## Clamp-on Terminator Installation on North & South Station-3

- Lower clamp-on terminators already installed for both north and south sta-3 (bottom 4 octants)
  - with new work platforms that reaches all of sta-3; install remaining (upper) clamp-on terminators.
- Analyses submitted to CAD engineering.







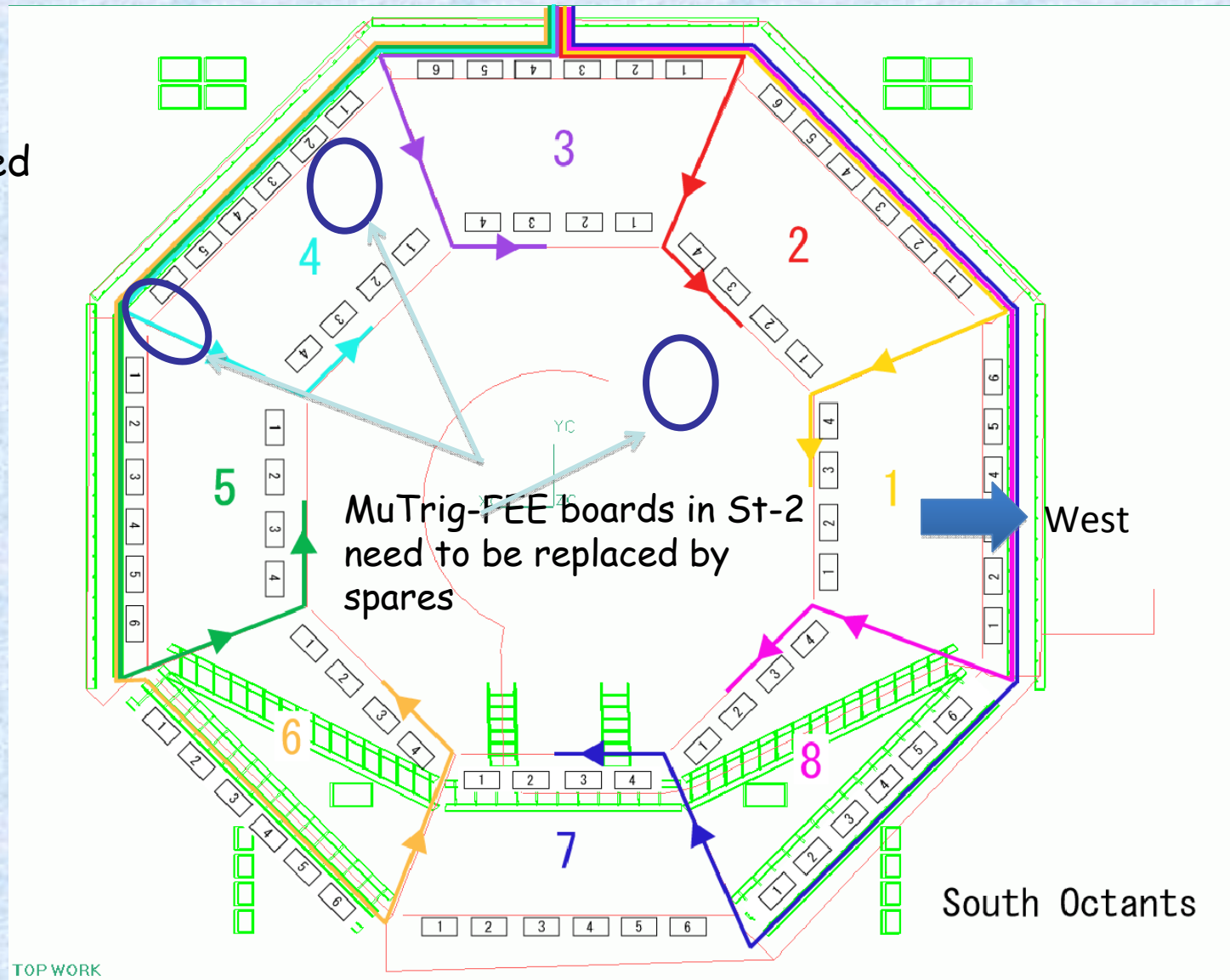
## MMN Work Platforms

# South Station-2

Location of electronics to be serviced



No boards in station-3 need to be served.



TOP WORK

6/20/2012

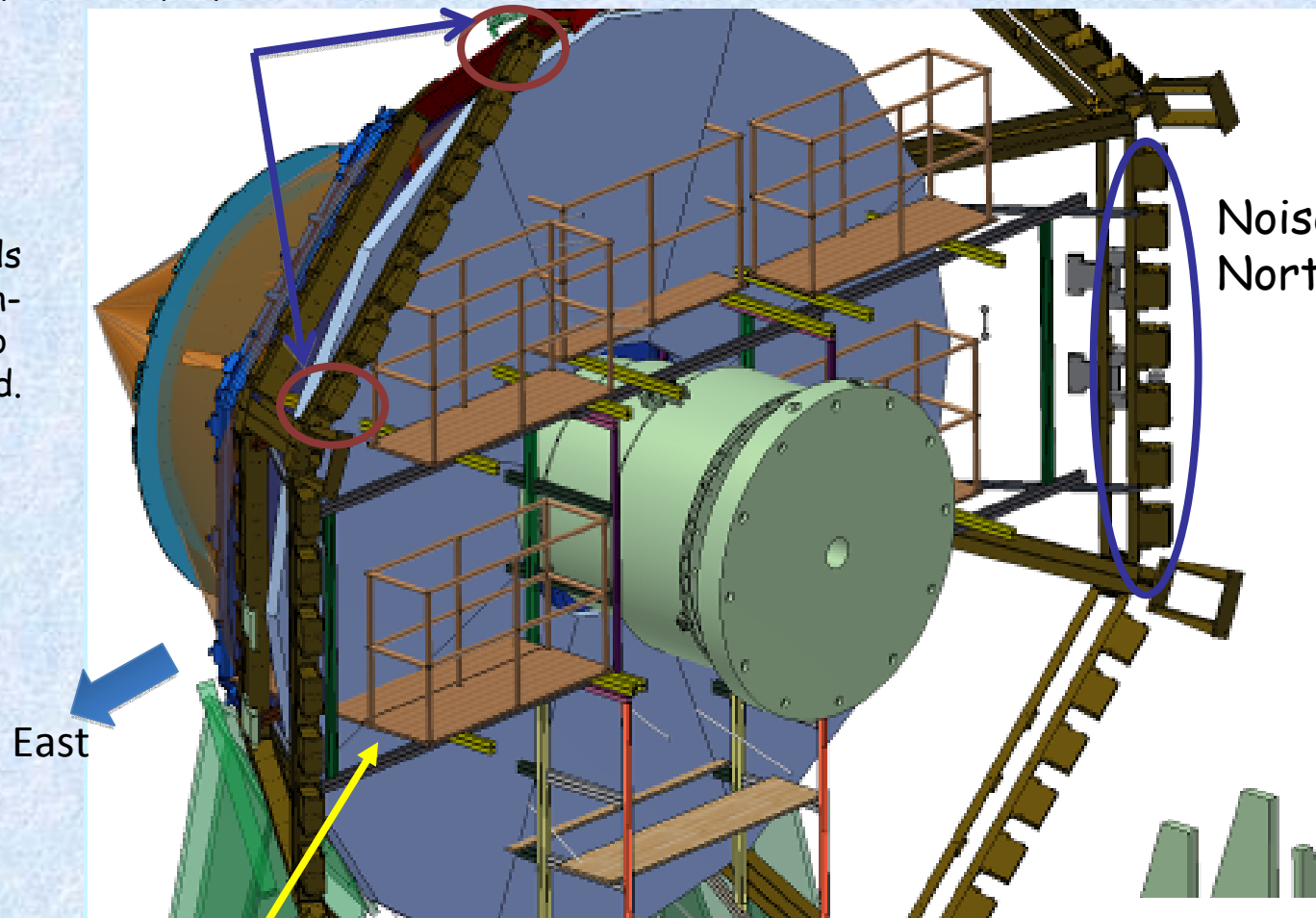
PH<sup>ENIX</sup> 2012 Shutdown

Slide # 6

# North Station-3

Octant-4  
MuTrig Electronics  
boards need to be  
replaced by spare

No boards  
in station-2  
need to  
be served.



Noise inspection  
North St-3 Oct-3



# 2012 Shutdown Schedule

Prep for shutdown	2/1-6/25/2011
Define tasks and goals	
Analysis and design of fixtures, tools and procedures	
Fabricate/procure tools and fixtures	
Tests, mockups, prototypes	
Receive, fabricate, modify, finish installables	
Review and approval of parts, tools, fixtures and procedures	
Assembly and QA tests	
AH Crane Upgrade (variable speed & wireless remote)	
End of Run Party	6/22/2012
Run 12 Ends	6/25/2012
Shutdown Standard Tasks	6/25-7/20/2012
• Open wall, disassemble wall, Remove MuID Collars,	
• Move EC to AH, etc.	
VTX Strip-pixel post run tests	6/25-6/30/2012
FVTX post run tests	7/1-7/8/2012
Disassemble VTX/FVTX services	7/9-7/27/2012
July 4 <sup>th</sup> Holiday	7/4/2012
Open Station 1 North, remove MPC North for repairs	7/9-13/2012
RPC1 North Cooling Upgrade	7/9-13/2012
Temporary power patch for IR and AH lights and cranes	7/16-7/20
AH electrical power panel upgrades	7/16-9/15
Remove VTX/FVTX and transport to Chemistry Lab	7/30/2012
Remove MMS & MMN vertical East lampshades	7/23-7/27/2012
Summer Sunday (8/5) Prep and teardown	8/1-8/7/2012
Summer Sunday (RHIC)	8/5/12



## 2012 Shutdown Schedule (Continued)

MuTr South Station 1 work	
Install access (Sta. 1 work platforms)	7/30-8/3/2012
Disconnect Cables, hoses etc, ID/label all	8/6-8/10/2012
Remove FEE plates and chambers	8/13-8/17/2012
Station 2 Terminators and manifold upgrade through access opened by station 1 removal	8/20/-8/31/2012
MPC South repairs	8/20-9/15/2012
RPC 1 South cooling upgrade	8/20-9/15/2012
Labor Day Holiday	9/3/2012
MuTr South Station 1 work (Cont'd)	
Clean/install new MuTr Sta. 1 chamber parts and upgrades (concurrent At RPC Factory)	8/20/-9/7/2012
Re-install chambers and FEE plates	9/10-9/14/2012
Re-cable, re-hose and test re-capacitation and air manifold upgrades	9/10-9/28/2012
Station 3 North and South (upper half)	7/23-9/30/2012
Repair upgrade, reassemble VTX/FVTX	7/23-10/5/2012
Test, survey (at Chemistry and IR) and re-install VTX/FVTX	10/8-11/9/2012
Substation breaker upgrade/test (CAD)	8/20-9/30
AH utility power distribution upgrade	8/20-9/30
DC West maintenance (replace window)	9/15-10/15
RPC stations 1 and 3, north and south maintenance	As required
Other detector maintenance as required	As required
Infrastructure maintenance as required	As required
TBD prototype tasks	As required
Open Station 1 North, re-install MPC North	10/16-10/26/2012
RPC1 North Cooling upgrade (if not completed earlier)	10/16-10/26/2012

6/20/2012

## 2012 Shutdown Schedule (Continued)

Veterans Day Holiday	11/12/2012
Pre-run commissioning and prep for run 13	11/1-12/31/2012
Prep for EC roll in	11/12-11/16/2012
Roll in EC	11/19-11/21/2012
Thanksgiving Holidays	11/22-23/2012
Prep IR for run	11/26-12/3/2010
Pink/Blue/White sheets	12/3-12/21/201
Christmas Holidays	12/24-25/2012
Start run 13	1/1/2013

# CONFINED SPACE ENTRY CERTIFICATION

Location Building 1008, IR, Muon Magnet North (MMN)		Date
Department PO	Division PHENIX	
Building 1008	Area/Location/Room: IR, MMN	
Supervisor/Designee Don Lynch/J. Carter Biggs		Life # 20146/15639

## PRE-ENTRY QUESTIONS

*For each item, check "yes" or "no": If no, consult Supervisor*

	YES	NO
Is entry essential to perform work?	<input type="checkbox"/>	<input type="checkbox"/>
Have all personnel been trained in confined space entry?	<input type="checkbox"/>	<input type="checkbox"/>
Are conditions safe to remove utility-hole cover?	<input type="checkbox"/>	<input type="checkbox"/>
Has opening been guarded?	<input type="checkbox"/>	<input type="checkbox"/>
Is monitoring equipment calibrated?	<input type="checkbox"/>	<input type="checkbox"/>
Has monitoring been performed and recorded below?	<input type="checkbox"/>	<input type="checkbox"/>
Is GFCI used, if outside or in wet conditions?	<input type="checkbox"/>	<input type="checkbox"/>
Is ventilation blown into bottom of space? (If required)	<input type="checkbox"/>	<input type="checkbox"/>
Are personnel instructed to evacuate upon hazard detection?	<input type="checkbox"/>	<input type="checkbox"/>
Have all workers reviewed these entry requirements?	<input type="checkbox"/>	<input type="checkbox"/>
Radiation: If present, RWP may be required – review work with ESH Coordinator and RCD personnel. Evaluate hazards and controls.	<input type="checkbox"/> <b>Reviewed</b>	<input type="checkbox"/>

## SPACE CLASSIFICATION QUESTIONS

For each item, check box only if "yes"

	Class 2A	Class 2B	Class 2C
Engulfment Hazard Present			<input type="checkbox"/>
Entrapment Hazard Present			<input type="checkbox"/>
Electrical Systems:			
• Deenergized	<b>X</b>		
• Energized and Working Hot			<input type="checkbox"/>
• Energized, but Guarded or not Working Hot	<input type="checkbox"/>		
Mechanical Systems:	n/a		
• Deenergized	<input type="checkbox"/>		
• Energized and Working Hot			<input type="checkbox"/>
• Energized but Guarded or not Working Hot	<input type="checkbox"/>		
Other Energized Systems: (e.g., steam, sewage)	n/a		
• Deenergized	<input type="checkbox"/>		
• Energized and Working Hot			<input type="checkbox"/>
• Energized but Guarded or not Working Hot	<input type="checkbox"/>		
Chemical Hazards inherent in space, based upon monitoring, but controllable by Ventilating - <b>Monitor for O<sub>2</sub> prior to entry</b>	X	<input type="checkbox"/>	
Chemical Hazards inherent in space, based upon monitoring, but not controllable by ventilating	n/a		<input type="checkbox"/>
Chemical Sources, introduced into space? (e.g., welding fumes, solvents)	n/a		<input type="checkbox"/>
High Temperature/Pressure Hazard? (other than steam utility-holes)	n/a		<input type="checkbox"/>

- If ANY box in column 2C is checked, a Confined Space Permit **IS** required.
- If any box in column 2B is checked, and none in column 2C, a Confined Space Permit **IS NOT** required **BUT** continuous monitoring and ventilating **ARE** required.
- If only boxes in column 2A are checked, no additional requirements apply.

## Classification evaluation

<b>CLASSIFICATION</b>  <div style="font-size: 2em; font-weight: bold;">CLASS:2A</div>	I have completed the front and back of this Confined Space Entry Certification form and classified this space. If the confined space is classified as a 2C, I will obtain a Confined Space entry permit. If the space is Class 2B, continuous monitoring and ventilation is required and will be documented on this form.	
Supervisor/Designee:	Life #	Date:

# BNL CONFINED SPACE ENTRY CERTIFICATION

Meter:	Serial #	Calibration Date:
Day of Use Sensor Check <input type="checkbox"/> Yes <input type="checkbox"/> No		
Tested By:	BNL#:	

## MONITORING RESULTS

Tested By:		BNL Number:			
Date/ Time	Oxygen % (% O2)	Flammable Gas (% LEL)	Carbon Monoxide (CO ppm)	Hydrogen Sulfide (H2S ppm)	Other:
<b>Pre-Entry Certification test</b>					
Acceptable Reading	19.5 – 23.5 %	< 10 % of LEL	<25 ppm	<10 ppm	

## Supplemental sampling record

# CLASS 2B CONFINED SPACE ENTRY CERTIFICATION

For Class2B spaces, continuous monitoring is required.

## MONITORING RESULTS

Tested By:		BNL Number:			
Date/ Time	Oxygen % (% O2)	Flammable Gas (% LEL)	Carbon Monoxide (CO ppm)	Hydrogen Sulfide (H2S ppm)	Other:
Acceptable Reading	19.5 – 23.5 %	< 10 % of LEL	25 ppm	10 ppm	

Class 2B: Describe Method of Ventilation:



# Muon Magnet Confined Space Entry Certification Sheet

*The undersigned certify that they have taken the BNL Confined Space Training, BNL Course # **HP-OSH-016**, within the last twenty four months, and understand the hazards involved in working in the south and north muon magnets (**MMS and MMN**).*

[illegible]

# Scaffold Safety Checklist

<b>Project &amp; Scaffold:</b>	<b>Job #</b>	<b>WO #:</b>
<b>Date of Inspection:</b> _____ <b>Competent Person(s):</b> _____ <b>Date Scaffold is complete:</b> _____		

[illegible]